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PATENT APPLICATION FEE DETERMINATION RECORD					Application or Docket Number BP1520					
CLAIMS AS FILED - PART I										
(Column 1) (Column 2)										
FOR		NUMBER FILED		NUMBER EXTRA		SMALL ENTITY		OTHER THAN SMALL ENTITY		
BASIC FEE (37 CFR 1.16(a))						RATE		FEE		
TOTAL CLAIMS (37 CFR 1.16(c))		44	minus 20 =	* 24			\$ _____		OR \$ 710	
INDEPENDENT CLAIMS (37 CFR 1.16(b))		5	minus 3 =	* 2			x \$ _____ = \$ _____		OR x \$ 18 = \$ 432	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))							x \$ _____ = \$ _____		OR x \$ 80 = \$ 160	
							+ _____ =		OR + _____ =	
							TOTAL \$ _____		OR TOTAL \$ 1,302	
* If the difference in column 1 is less than zero, enter "0" in column 2										
CLAIMS AS AMENDED - PART II										
(Column 1) (Column 2) (Column 3)										
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA		SMALL ENTITY		OTHER THAN SMALL ENTITY	
	Total (37 CFR 1.16(c))		*	Minus	**	=	RATE		ADDITIONAL FEE	
	Independent (37 CFR 1.16(b))		*	Minus	***	=	x \$ _____ =		OR x \$ _____ =	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							x _____ =		OR x _____ =	
							+ _____ =		OR + _____ =	
							TOTAL		OR TOTAL ADDIT. FEE	
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA		ADDITIONAL FEE		ADDITIONAL FEE	
	Total (37 CFR 1.16(c))		*	Minus	**	=	RATE		ADDITIONAL FEE	
	Independent (37 CFR 1.16(b))		*	Minus	***	=	x \$ _____ =		OR x \$ _____ =	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							x _____ =		OR x _____ =	
							+ _____ =		OR + _____ =	
							TOTAL		OR TOTAL ADDIT. FEE	
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA		ADDITIONAL FEE		ADDITIONAL FEE	
	Total (37 CFR 1.16(c))		*	Minus	**	=	RATE		ADDITIONAL FEE	
	Independent (37 CFR 1.16(b))		*	Minus	***	=	x \$ _____ =		OR x \$ _____ =	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							x _____ =		OR x _____ =	
							+ _____ =		OR + _____ =	
							TOTAL		OR TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.